S 17

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS			Use separate schedule(s) for each category of the	FOR LINE NUMBER: PAGE 231 OF 330 (check only one)									
TI LIVIIZED REC			Detailed Summary Page		11a 13		11b 14		11c 15	12		X 17	
or for commercial purp	oses, other than using	d Statements mathe name and a	ay not be sold or used by any political committee	person for	or the	pur _l ntrib	oose outions	of so	oliciting m such	contr	ibutior mittee	าร	
NAME OF COMMIT MAVERICK F	,												
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. GRIEVE, ALEXANDER, , ,						Date of Receipt							
Mailing Address 13	20 RIGGS ST NW				11 20 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y								
City WASHINGTON		State DC	Zip Code 20009						17.12				
FEC ID number of contributing federal political committee. Name of Employer (for Individual) DTCC		С	2000			τοτ	Eacn	Hec	eipt th	is Per	ioa 62.50		
		Occ				Memo Item							
		GO'				NON-CONTRIBUTION: EARMARKED THROUWINRED [SA17.11271]							
Receipt For: Primary													
Other (specify		312.50											
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. GRIEVE, ALEXANDER, , ,						Date of Receipt							
Mailing Address 132	20 RIGGS ST NW	la.		_ [12	1	2	0	/ Y	2021	Y]	
City WASHINGTON		State DC	Zip Code 20009		Trans						iod		
FEC ID number of federal political com	•	С			unoun	. 01	Lucii	1100	oipt iii	-	62.50		
Name of Employer DTCC	(for Individual)		upation (for Individual) VERNMENT RELATIONS		ON-CC	NTI	_		MARK	ED TH	I ROU		
Receipt For:		Aggregate	Aggregate Year-to-Date ▼			WINRED [SA17.11295]							
Other (specify	General () ▼	375.00											
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. GRIFFIN, JUSTIN, , ,						Date of Receipt							
Mailing Address 1111 NEW JERSEY AVE SE					07 14 2021								
City State		State	Zip Code		Transaction ID : SA17.11431								
WASHINGTON DC FEC ID number of contributing federal political committee.			20003	A	Amount of Each Receipt this Period 62.50								
Name of Employer	(for Individual) YBER SECURITY INITI	I	upation (for Individual) IAGING DIRECTOR	I	ON-CC	TNC				MARK	ED TI	HROL	
Receipt For: Primary Other (specify	General	Aggregate	Year-to-Date ▼ 437.50		/INREI	O [S,	A17.1	1147]				
SUBTOTAL of Receir	ots This Page (ontional)		_	_	-	-	-	-	18	37.50	$\overline{}$	